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|---|---------------------------|---------------------------|---|------------------------|---------------------------|--|--|--|--------------|--|----------|--|--------|--|---|--|---|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (Large Entity) | | | | | Docket No. IR 3663 CIP | | | | | | | | | | | | | |
| In Re Application Of: AUBART, et al | | | | | | | | | | | | | | | | | | |
| Application No. 10/705,693 | Filing Date 11/10/2003 | Examiner Sanders, K.A. | Customer No. 31684 | Group Art Unit 1714 | Confirmation No. 5227 | | | | | | | | | | | | | |
| Invention: TRIARYLSILYL(METH)ACRYLOL-CONTAINING POLYMERS FOR MARINE COATING COMPOSITION <div style="text-align: right;">RECEIVED CENTRAL FAX CENTER OCT 27 2005</div> | | | | | | | | | | | | | | | | | | |
| COMMISSIONER FOR PATENTS: | | | | | | | | | | | | | | | | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of <u>June 22, 2005</u> above-identified application. <small style="margin-left: 100px;">Date</small> | | | | | | | | | | | | | | | | | | |
| The requested extension is as follows (check time period desired): <input type="checkbox"/> One month <input checked="" type="checkbox"/> Two months <input type="checkbox"/> Three months <input type="checkbox"/> Four months <input type="checkbox"/> Five months from: <u>09/22/2005</u> until: <u>11/22/2005</u> <small style="margin-left: 100px;">Date</small> <small>Date</small> | | | | | | | | | | | | | | | | | | |
| The fee for the extension of time is \$450 and is to be paid as follows: <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 01-2717 <input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 01-2717 <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | | | | | | | | | | | | |
| <u>Thomas F. Roland</u> <small>Signature</small> Thomas F. Roland, Esq. Reg. No. 42,110 | | | Dated: October 27, 2005 | | | | | | | | | | | | | | | |
| 10/31/2005 BABRAHA1 00000046 012717 10705693 01 FC:1252 450.00 DA | | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being</td> </tr> <tr> <td style="text-align: center;"><u>faxed</u></td> <td></td> </tr> <tr> <td style="text-align: center;">10/27/05</td> <td></td> </tr> <tr> <td style="text-align: center;">(Date)</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;"> <u>Michelle T. Muller</u> <small>Signature of Person</small> <small>Correspondence</small> </td> </tr> <tr> <td colspan="2" style="text-align: center;"> Michele T. Muller <small>Typed or Printed Name of Person</small> <small>Correspondence</small> </td> </tr> </table> | | | | I hereby certify that this correspondence is being | | <u>faxed</u> | | 10/27/05 | | (Date) | | <u>Michelle T. Muller</u> <small>Signature of Person</small> <small>Correspondence</small> | | Michele T. Muller <small>Typed or Printed Name of Person</small> <small>Correspondence</small> | |
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| 10/27/05 | | | | | | | | | | | | | | | | | | |
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